

ISSUE S.I.P. STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SP		8.31.01
O.I.P.E. CLASSIFIER		13	9/8/01
FORMALITY REVIEW	B2	TC3-883	12-01-01
RESPONSE FORMALITY REVIEW	SP	1091	3/20/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	06/12/01
2	✓	✓	06/12/01
3	✓	✓	06/12/01
4	✓	✓	06/12/01
5	✓	✓	06/12/01
6	✓	✓	06/12/01
7	✓	✓	06/12/01
8	✓	✓	06/12/01
9	✓	✓	06/12/01
10	✓	✓	06/12/01
11	✓	✓	06/12/01
12	✓	✓	06/12/01
13	✓	✓	06/12/01
14	✓	✓	06/12/01
15	✓	✓	06/12/01
16	✓	✓	06/12/01
17	✓	✓	06/12/01
18	✓	✓	06/12/01
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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10-0-01-01
 03/20/02
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